RECEIVED
2014 AUG 22 PM 12: 45
FEC MAIL CENTER

Committee Name:	
Citizens and Public Saf	ety Proponents for Truth PAC
If registered, FEC ID:	
Pending	
Today's Date:	
8/21/2014	

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Nancy R. Haley

, Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

						Office Use Only
NAME OF COMMITTEE (in full)		(Check if name is changed)		nple:If typing, type the lines.	12FE	4M5
Citizens and Public Safe	ty Pro	ponents for Trut	h PAC	1 1 1 1 1 1 1		
	1]]		1 1	<u> </u>	<u>! </u>	
ADDRESS (number and street)	330	Encinitas Blvd.,	Ste. 1	01 		
(Check if address is changed)	Enci	nitas			CA	92024
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES				dress)		
(Check if address is changed)	nhal	ey@thinkcpa.com				
COMMITTEE'S WEB PAGE ADI	DRESS	(URL)				
(Check if address is changed)						
2. DATE 08 21	D /	2014		·		•
3. FEC IDENTIFICATION NUMBER						
4. IS THIS STATEMENT X	NE	W (N) OR		AMENDED (A)		
I certify that I have examined the	nis State	ment and to the bes	st of my	knowledge and belief i	it is true, c	orrect and complete.
Type or Print Name of Treasure	r <u>Na</u>	ncy Haley	<u> </u>			Mam , U U U , Y EY EY U V U V U V U V U V U V U V U V U V U
Signature of Treasurer		Na)~~	7		Date	
				ect the person signing		nent to the penalties of 2 U.S.C. §437g. DAYS.
Office Use Only				For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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F	EC For	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
Name Candi			
Candi Party	date Affiliatio	on Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi	-		
Part	y Con	nmittee:	
 (d)			ocratic, blican, etc.) Party.
Polit	ical A	action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
		Corporation Corporation w/o Capital Stock Lab	or Organization
		Membership Organization Trade Association Cod	perative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregar committee. (i.e., nonconnected committee)	ated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	draising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Com	nmittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.		
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02	2/2009)	Page 3
Write or Type Committee Name		
Citizens and Public Safety	Proponents for Truth PAC	
5. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
Ndne		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
. Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in po	ossession of committee
Full Name	ley 	
Mailing Address	330 Encinitas Blvd., Ste. 101	
	Encinitas CA 92024	<u> </u>
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	632 - 3600
3. Treasurer: List the name and any designated agent (e.g., as	address (phone number – optional) of the treasurer of the committee; and the n ssistant treasurer).	ame and address of
Full Name Nancy Hall of Treasurer	Ley	<u></u>
Mailing Address	330 Encinitas Blvd., Ste. 101	
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number 760	632 3600

I

Name of Bank, Depository, etc.

1403-129-0261

Mailing Address

CITY

STATE

ZIP CODE

FE3AN042.PDF

FedE

1403-129-0262

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WASHINGTON, DC 20463

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999 E ST NW

Invoice # PO # Dept #

FRI - 22 AUG AA STANDARD OVERNIGHT

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1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
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(8/2013)	